

March 4, 2014

Written testimony of Chris Wright in Support of S.B. No. 253 (RAISED) AN ACT CONCERNING TEMPORARY NURSING HOME BED REDUCTIONS.

Dear Senator Slossberg, Representative Abercrombie and to the members of the Human Services Committee. My name is Chris Wright; President/CEO of iCare, a longstanding Connecticut based Management Company that operates 10 skilled nursing facilities in Hartford, Rocky Hill, Manchester, East Windsor, Farmington, Bloomfield and Meriden. We take care of approximately 1,250 residents and patients on a daily basis in our facilities and employ over 1,700 CT workers. Our facilities are longstanding providers of nursing care in their respective communities and our facilities have received quality awards and recognition from the American Health Care Association (AHCA). I am submitting a written testimony to ask the Human Services Committee to support S.B. No. 253 (RAISED) AN ACT CONCERNING TEMPORARY NURSING HOME BED REDUCTIONS. This bill is being advanced by the Connecticut Association of Health Care Facilities (CAHCF), of which our organization is a member.

This legislation will accelerate the state's long term care rebalancing goals, while improving resident care and maintaining the viability the skilled nursing facilities facing low census. The bill accomplishes these policy goals by providing for the temporary or permanent de-licensing of nursing home beds. This program has been modeled after a similar program in Rhode Island and has been modified to fit Connecticut's needs. The proposal will add to the range of current long term care rightsizing and rebalancing initiatives underway

The policy advanced in the bill would allow a facility to temporarily remove currently licensed beds from service. The beds must remain unlicensed for a minimum of six months. The beds would be available for transfer or sale in accordance with existing Connecticut law (17b-354 CGS). In order for beds to be temporarily de-licensed and have the facility qualify for a rate increase, the facility's utilization and the overall utilization in a specified geographical area must be able to absorb the reduction within current vacancies.

The bill would allow our 10 facilities to operate much more efficiently and cost effectively, thereby assuring stability in the delivery of skilled nursing facility services in our region, but at the desired lower bed capacity. At once, the bill will advance the state's rebalancing policy goals because the supply of nursing facilities beds will be de-licensed temporarily, and in many cases permanently, unless the need for the reinstatement of beds can demonstrated.

Our state can accelerate it's rebalancing goals with this bill, while establishing a clear policy that provides an organized and stable approach to delivering high quality nursing facility services with fewer beds.

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